pg. 1008 10.

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)	Summary Sneet			
Indiana Election Commission (IC 3-9-5-14)	2015 APR 12 FILE NUMBER			
INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For	For 1:38			
assistance in completing this form, see instructions on the reverse side.	TOTAL PAGES IN ENTIRE CFA-4 REPORT			
IS THIS AN AMENDMENT? 🗌 Yes 🔀 No	HMMITTON COSTACT 10			

STAPLES

·	WURIS		
COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Check If this is a new name	ame		
DeMore for City Council			-
2. Acronym or Abbreviated Name (If any)	3. Committee Teld	phone Number	. 7
	(317)6	29-04	87
4. Malling Address (eddress where all campaign finance correspondence is received) Ch	eck if this is a new	address	
	6, Party Affillation	(if applicable)	
Noblesuille IN 46060	Democ		
CANDIDATE INFORMATION (For Candidate's Co	mmittees Only)	n Primitivalização	4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
7. Full Name of Candidate (Include any pickname)	8. Party Affiliation	or if independent	Candidate
Marie (Mini) Demore			
a Office Sought (Include district number, if any, Not required for exploratory committee.)	10. County of Res	ldence	
Noblesville City Common Council Antage	10. County of Res Hamu	140	
TYPE OF REPORT	The second section is	CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
Primary Pre-Election Annuel Nomination Other		Pre-Conve	
Final/Disbands Committee (lines 18, 19, and 20 must be '0') Utgoing Treasurer (within 10 days smend Statement of	Organization)	Post-Conv	vention
12. Reporting Period:	ÇC	LUMN A	COLUMN B
From 1 - 1 - 15 - Through: 4-10 - 15	Th	is Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			
14. Cash on hand and investments January 1, ситепt year.			
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	0.1	10.00	290.00
15a. Itemized (use Schedule A)		20.00	0
15b, Unitemized	OTAL OF	0.00	
15c. Add lines 15a and 15b in both columns SUBT			290.00
To. Add lines to and too in column Mand lines 14 and 155 in column 2	OTAL 2.4	0.00	701
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a, Itemized (use Schedule B) (Public Question; use Schedule C)			
17b. Uniternized	<u> </u>		
11/4. And mines 11/4 diffe the life belief	TOTAL D	- 62	,
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)		7.00	
19. Debts OWED BY the committee (use Schedule D)	0	- 20	
20. Debts OWED TO the committee (use Schedule E)	2.5	0.00	

CORRECT AND COMPLETE.
Date 3-15-15
ライント語う
Date -15-15
- C\1.
3-9-4-5) A person who knowingly

and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

ASTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year, Otherwise, this is optional.

	FJI	E NUMI	BER	
Page_		of _	10	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
" Marie DeMore 1398 Winton St	Contributions: Direct In-Kind (describe)			3 1-
Noblesuille IN 46060	Other Receipts;	250.00	250.00	
	Miso, (specify)			
Contributor's Occupation (If required)				
2 Adam Fisher	Contributions:			
3339 Summerbreeze	In-Kind (desaribe)	40.00	290.00	3-23-15
Indplo, IN CF	Other Receipts:			
46239	Misc. (specify)	·		
Contributor's Occupation (if required)	Contributions:			
	☐ Direct ☐ In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
Contributor's Occupation (il required)	Harry Wall Company of the Company of			
4.	Contributions: Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan ☐ Misc. (specify)		' :	ļ
Contributor's Occupation (if required)				
5.	Contributions: Direct			
,	In-Kind (describe)			
	Other Receipts:			
,	☐ Interest ☐ Loan			
Contributor's Occupation (#required)	Miso. (specify)		-	
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TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$		
(Enter total on ITEM	15a of the Summary Sheet)	•		

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

TRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly in
BLACK INK all Information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This
schedule is used to document contributions and receipts totaled on ITEM 15g of the Summary Sheat. All cumulative contributions
from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular
party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, relums of deposit, proceeds
from sales, Interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over
\$200 if regular party committee).

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	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.		Contributions; Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			~ '
2.		Contributions: Direct In-Kind (describe)			
~·		Other Receipts: Interest Loan Miso. (specify)			
•• <u>·</u>				***************************************	
3.	•	Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Miso, (specify)			•
4.		Contributions: Direct In-Kind (describe)			_
		Other Receipts: Interest Loun Miso. (specify)	-	•	***************************************
5,		Contributions: Direct In-Kind (describe)			
	1	Other Receipts: Interest Loan Misc. (specify)			
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type of print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee), All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	•			, ''
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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miso. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miso, (specify)		·	
5,	Contributions: Direct (n-Kind (desaribe)			
 	Other Receipts: Interest Loan Misc. (specify)			
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct in-Kind (describe)		-	
	Other Receipts: Interest Lean Miso. (specify)			
2.	Contributions; Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (spealfy)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)	Management of the second		
	Other Receipts: Interest Loan Misc. (specify)			
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TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly in BLACK INK all information on this schedule, For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15g of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calender year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers in and in kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as foen proceeds and repayments, refunds, rebalas, returns of deposit, proceeds from sales, interest or other Income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	TO CONTROL ITION	COLUN	IN A	COLUMN B	DATE RECEIVED
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	AMOUNT PERIO	THIS	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
(street, number, city, state, ZIP code)	Contributions: Direct In-Kind (describe)		•		
	Other Receipts: Interest Loan Misc. (specify)				
2.	Contributions: Direct In-Kind (describs)				
	Other Receipts: Interest Loan Misc. (specify)	Analysis of the second of the			
3.	Contributions: Direct In-Kind (describe)				
	Other Receipts: Interest Loan Misc. (specify)				
4,	Contributions: Direct In-Kind (describe)		,		
	Other Receipts: Interest Loan Misc. (specify)				
5.	Contributions: Direct In-Kind (describe)	1			
	Other Receipts: Interest Loan Misc. (spaolfy)				
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TOTAL OF ALL PAGES OF SCHEDULE					



REPORT OF RECEIPTS AND EXPENDITURES

OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

/ the anniotone in completion this
INSTRUCTIONS: Please type or print legibly IN BLACK INK all Information on this schedule. For assistance in completing this
INSTRUCTIONS: Please type or print legicity in BLACK that all information do document expenditures totaled on ITEM 17a of the schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the schedule, see instructions on the reverse side. This schedule is used to document expenditures and other antilias OVER \$100 per
This cohodula is spend to document expenditures totaled on the life of the state of
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Surface in a community of the community
Character Chart All Aumulative expanses cald to individuals, Dusinesses, (audi digatizations and direct of the
schedule, see instructions on the reverse side. This schedule is used on a schedule and other entities OVER \$100 per Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per Summary Sheet. All cumulative recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative
recipient, within a calendar year MOST be itemized on this schedule, (such as transfers-out from candidate, legislative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative
and the second self-to political committees (Such as Iransiers-Out Holli Callundie, icylology of
ANNANCAS INCIDINA IN-KING, (ADBIDIESS OF ATTOMOSO) PARTICIPATE OF ANNANCAS (ADAINS)
CAPERIOOS, Intologing in turns I restrict the second on the second in
caucus, nolitical action, or regular party committees) MUST be itemized on this schedule.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code		Direct :In-Kind Prayment of Dobt Returned Contribution Other Purpose:			
Godo		Direct In-Kind Peyment of Debt Returned Contribution Other Purpose;			-
Code	· · · · · · · · · · · · · · · · · · ·	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
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State Form 4608 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

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Page_	7	of	

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<u> </u>	JC QUESTION INFORMATION		
Enter Text of Public Question		•	
	•		
Type of Question: Statewide Local			
Position: Supported Opposed	OCCUPATION TYPE OF EXPENDITURE	COLUMN A COL	UMN B DATE OF
RECIPIENT'S NAME AND MAILING ADDRESS RECIPIENT'S (street, number, city, state, ZIP code)	OCCUPATION TYPE OF EXPENDITURE and PURPOSE (be specific)	MOUNT THIS CUM	ULATIVE EXPENDITURE
Code	☐ Cirect ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose;		
da	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		
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Çade	☐ D!rect ☐ In-Kind ☐ Paymont of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:		
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor pald by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

	· -			
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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (streef, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
LENDER'S OCCUPATION			1.1111		
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period, include all amounts the committee has loaned to others.

	FILE	NUMBE	R	
Page _	9	of	10	

BORROWER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER'S NAME & MAILING ADDRESS (iFany) (street, number, city, state, ZIP code)	ORIGINAL AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Marie Denore 1398 Clinton St Noblesville IIN 46000		Loan to Start Campaign	3-23-15	0	
·					
	·				
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